Village of Sleepy Hollow- Office of Village Clerk

License year	n		\$120.00 three years		
License year: Date: Please read the attached requirements and instructions page before completing this form.					
Original License:	Renewal License:				
I, the undersigned, do hereby make under ordinance adopted May 20,19	• •	the Village of Sleep	y Hollow, New York		
1. Full Name:			Age: Sex:		
Name as it appears on your driver's	s license:				
Date of Birth:	Place of Birth:				
Social Security #:	Tel :				
2.Current Address:		How L	ong:		
Previous Addresses (5 Years)		How I	_ong:		
		How	Long:		
		How	Long:		
3. Driving Record State Issued	I.D.#				
List all convictions, suspensions, re years for driving while intoxicated).	vocations, location of court and d	lispositions for the I	ast 5 years (last 10		
4. Have you ever been convicted of	a micdomognor or follow?	If was li	et datas, courts		
Have you ever been convicted of crime/reason & disposition	a misdemeanor or reiony?	-	st dates, courts,		
5. List all motor vehicle accident for	the last 5 vrs (property damage	& personal injury) *			
o. List all frictor voriloid addiagnit for	the last of the (property damage)				

*Applicant's driv	ing record will be checked	with the New York State De	ept. of Motor Vehicles		
6. Are you a United States Citizen? If "NO" have you declared your intention to become a citizen? If "YES," state the date on your papers & the court by which it was granted:					
		cities or infirmities, of which control of a motor vehicle?	you are aware, which would in any way		
	oyers: Beginning with the proccupation with same for		sses of your current and previous		
Date (from/to)	•	Address	Occupation		
,	1				
It is further agreed by the applicant that he/she will conform with all sections of the ordinance & rulings of the Police committee governing taxicab drivers. If necessary, the applicant may attach additional sheets of paper to this application & continue said information by section #.					
State of New York) County of Westchester) ss: Village of Sleepy Hollow)					
, being duly sworn, deposes & says that he/she is the individual making the forgoing application for taxicab drivers license; and that the answers to the forgoing questions & other statements contained therein are true of his/her own knowledge and belief.					
Sworn to before	on this	day of	20		
Notary Public		Applicant's signa	ature		
Application Approved/Disapproved Date:					
ъу			(Chief of Police)		
Remarks:					

Requirements and Instructions

APPLICATIONS THAT ARE TORN OR SOILED WILL NOT BE PROCESSED.

Applicants must be eighteen (18) years of age, possess a New York State Class A, B, CDL, C or E driver's license or the equivalent thereof and have thorough knowledge of the provisions of the Taxicab ordinance of the Village of Sleepy Hollow and the geography of Sleepy Hollow.

Each applicant must file with his/her application three (3) unmounted, unretouched photographs of him/herself in full face, taken with thirty (30) days of filing said application.

The applicant shall list two (2) persons as references of good character from two (2) reputable citizens who have known applicant for at least two (2) years prior to the date of the application. Relative references are not accepted.

The license fee for each applications/license, whether original or renewal, will be \$50.00 for one (1) year or \$120.00 for three (3) years. A lost license will cost \$35.00 for replacement. Late fee is \$40.00.

All licenses shall begin on the first day of May of each year and terminate on the 30th day of April following, unless suspended or revoked. Renewals shall be submitted prior to May 1st.

After completing the application to the satisfaction of the Village Clerk, the applicant shall take said application together with three (3) photographs to the Sleepy Hollow Police Department (original License only) Officer in charge of fingerprints and at such time as the Officer in Charge may direct, said applicant shall submit to having the impressions of the fingers of his/her right and left hands taken upon forms supplied by Sleepy Hollow.

The Village Clerk shall promptly report any false statement by the applicant for a taxicab driver's license to the Sleepy Hollow Police Department Police chief. The clerk is herby authorized and empowered to require such additional information as he/she may deem necessary.

REFENCES OF GOOD CHARACTER:

1.	Name:Address:			
			Relationship	
	Occupation:		Employed by:	
	Address:		Tel#	
2.	. Name:Address:		Address:	
	Age:	Tel#	Relationship	
	Occupation:		Employed by:	
	Address:		Tel #	

APPLICANTS DO NOT WRITE ON THIS PAGE

Character and criminal record, if any, to be investigated by the Sleepy Hollow Police Department.

Fingerprints:			
Date Taken:	Officer:		Shield:
Investigation Remarks:			
License Number:		Date Issued:	
By Village Clerk:			
Remarks:			